U.S. Peterd and Trademark Office; U.S. DEPARTMENT OF COMERCE

Under the Paperwork Reduction Act of 1895, no parsons are required to respond to a contection of information unless & displays a year OMB controllumber. Substitute for Form PTO-875 Application or Dockel Number Effective December 8, 2004 APPLICATION AS FILED - PART I 25602 (Column 1) (Column 2) SMALL ENTITY OTHER THAN OR FOR SMALL ENTITY HUMBER FRED NUMBER EXTRA BASIC FEE PATE FEE O (3) CFR 1.16(4), (6), or (c)) NA RATE (1) N/A SEARCH FEE NA 150.00 (3) CFR 1 16(N) (N, OX (M)) · N/A NA 300.00 NIA. EXMINATION FEE NVA \$260 (\$1 CFR 1.16(0), (p), or (q)) NIA N/A \$500 NA TOTAL CLAMES N/A \$100 (37 CFR 1.16(H) NIA \$200 WHINE 20 = X\$ 25 INDEPENDENT CLAIMS (37 OFR 1.16(N) XSSO OR minus 3 X100 If the specification and drawings exceed 100 X200 APPLICATION SIZE . sheets of paper, the application size fee due FEE is \$250 (\$125 for small entity) for each (37 CFR 1.16(6)) additional 50 sheets or traction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s) MULTIPLE DEPENDENT CLAIM PRESENT (37 OFR 1.16(II) +180= "If the difference in column 1 is less than zero, enter "o" in column 2. +360= TOTAL APPLICATION AS AMENDED - PART II TOTAL (Column 1) (Column 2) (Column 3) SMALL ENTITY CLAIMS OTHER THAN OR HIGHEST 10 100/00 REMAINING NUMBER PRESEN AFTER ENDMENT RATE (1) PREVIOUSLY ADDI-EXTR MENDMENT RATE (1) THOMAI ADDL Total proces the FEE (1) Minus TIONAL FEE (1) profe Light X\$ 25 Minus 7 X\$50 OR Application Size Fee (37 CFR 1.16(s)) X100 X200 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.140) +180= +360= OR TOTAL ADD'L FEE TOTAL ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST 8 REMAINING NUMBER PRÉSENT AFTER RATE (1) AMENDMENT PREVIOUSLY ADDI: WENDMENT EXTRA RATE (1) ADDI-TIONAL FEE (1) PAID FOR Total profesion TIONAL FEE (1) Minus Independent OF CFA LIGAT X\$ 25 Minus X\$50 OR Application Size Fee (37 CFR 1.16(5)) X100 X200 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160) +180= +360= OR If the entry in column 1 to less than the entry in column 2, write "o' in column 3.

If the Titighest Number Previously Paid For IN THIS SPACE to less than 20, enter "20".

The Highest Number Previously Paid For IN THIS SPACE to less than 3, enter "3".

This collection of Information is required by 97 CFR 1.16. The Information is required to obtain by retain a bangin by the public which is to life (and by the Inchilding gathering, preparing, and submitting the completed application formation is required to obtain by the public which is to life (and by the Inchilding gathering, preparing, and submitting the completed application form to the USPTO. Three was very depending upon the inchildual case. Any comments on the amount of this you require to complete his form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Dependment of Commence, P.O. Box 1450, Alexandria, VA 22313-1450. On NOT SEND FEES OR COMPLETED FORMS TO THIS TOTAL